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The Urban District of Normanton

Annual Health Report

Year ended 31st December, 1949

Medical Officer of Health and Divisional Medical Officer for Maternity and Child Welfare Service and School Medical Service:

J. M. PATERSON, M.B. Ch.B., D.P.H., M.R.San.I.

Sanitary Inspector:

E. RIDDIOUGH, M.R.S.I., A.M.I.S.E., M.S.I.A.

URBAN DISTRICT COUNCIL OF NORMANTON.

PUBLIC HEALTH COMMITTEE.

as at 31st December, 1949.

Chairman.

Cr. S. Armstrong.

Councillors

Cr. Appleyard.
B. Bacon, C.C.
J. Bacon.
Chivers.
Clarke.
Eden.
H. Hall.
S. Hall.
Harbridge.
Hargrave.
Mackinnon.
Metcalf, J.P.
Moorhouse.
Potts.
Pyrah.
Shearn.
Sunley.
Mrs. Sylvester, J.P. (Chairman of the Council)
Ex-officio.

DIVISIONAL MEDICAL OFFICER.

J. M. Paterson, M.B. Ch.B. D.P.H. M.R.San.I.

DEPUTY DIVISIONAL MEDICAL OFFICER.

J. S. Walters, M.B. Ch.B. D.P.H.

Part-time Medical Officers.

Dr. H. Scholefield - Maternity and Child Welfare.
Dr. M.M. Scholefield - School Diphtheria Immunisations.

Paediatrician.

Dr. W. Henderson.

Ophthalmic Surgeon.

L. Wittels, M.D. (Vienna) D.O.

E.N.T. Surgeon.

N. S. Daw, M.B. Ch.B. D.L.O. (Resigned March 1949)

Orthopaedic Surgeon.

D. H. Russell, M.D. Ch.B. F.R.C.S.E. (Resigned 31.12.49)

Health Visitors and School Nurses.

F. Tate, S.R.N. S.C.M.
H. Macdonald, S.R.N. S.C.M. H.V.
M. Stephenson, S.R.N. S.C.M. R.F.N. H.V.
A. Varley, S.R.N. S.C.M. H.V. (From 11th April, 1949)

Midwives.

N. Deakin, S.R.N. S.C.M.
D. Donoghue, S.C.M.
F.E. Greenwood, S.C.M.
I. Lord, S.R.N. S.C.M. - Relief Midwife.
D. Whitworth, S.R.N. S.C.M. (From 9th May, 1949)

Home Nurses.

F. G. Hornby, S.R.N. S.C.M. Q.I.D.N. H.V.
P. I. Mashford, S.R.N. S.C.M. R.S.C.N. Q.I.D.N.
L. Epton, S.R.N. S.C.M.
B. Prince, S.R.N. S.C.M.

THE URBAN DISTRICT COUNCIL OF NORMANTON.

ANNUAL HEALTH REPORT.

1949.

To the Chairman and Members of the Normanton Urban District Council.

I have the honour of presenting to you, this my third Annual Report, being a report of the health of your district for the year 1949.

Statistics and Social Conditions of the Area.

Area (Acres).....	3,061
Population (Estimated R.G.).....	19,170
Number of Inhabited Houses (1938).....	5,015
Number of Inhabited Houses (1949).....	5,480
Rateable Value.....	£74,591
Sum represented by a penny rate.....	£285
Density of Population.....	6.2 persons per acre.

The Urban District is divided into 6 wards namely:-
Woodhouse, Altofts, Common, Normanton Part 1,
Normanton Part 2, Normanton Part 3.

During the year there has been a slight population increase, amounting in all to 50 so that according to the Registrar General's estimate, it now rests at 19,170 as compared with last year's total of 19,120. The existing density of population therefore has been influenced but slightly and now works out at 6.2 persons per acre. The success of our post war housing schemes is reflected in the increased number of inhabited houses in Normanton for 1949 as compared with the pre-war figure, but this increase of 465 woefully falls short of the actual numbers required. Building restrictions during the war left us no alternative but to neglect this aspect of environmental improvement altogether and in the national interest to concentrate on much more vital issues. If our problem therefore was simply one of making up this lee way, due to our forced inactivity over a period of 6 years, it would in all faith be serious enough but it is unfortunately complicated by an added factor potentially common to many mining communities, namely that of housing subsidence. The actual degree of subsidence has been so great in Normanton that numerous families have had to leave their homes because they had become uninhabitable and in this way many of the new council houses built have had to be utilised in re-housing these homeless families.

Vital Statistics.

Births.

	Male.	Female.	Total.
Live. Legitimate.....	156	146	302
Illegitimate.....	6	6	12
	162	152	314
Still. Legitimate.....	6	2	8
Illegitimate.....	-	-	-
	6	2	8
Total Births.....	168	154	322

Live Birth Rate per 1,000 estimated population - 16.4
Still Birth Rate per 1,000 estimated population - 0.41

BIRTH RATES (per 1,000 Civilian Population).

	1946.	1947.	1948.	1949.
Live Birth Rate for Normanton.	18.3	21.1	17.7	16.4
Live Birth Rate for England & Wales.	19.10	20.50	17.9	16.7
Still Birth Rate for Normanton.	0.73	0.52	0.52	0.41
Still Birth Rate for England & Wales.	0.53	0.50	0.42	0.39

A review of our population figures during the last four years reveals the fact that the Normanton Birth Rate in common with that for England and Wales has shown noticeable fluctuations and starting from 1947 which was a peak year, there has been a gradual fall in our annual Birth Rate. This fall during the last two years has kept quite closely in line with that for England and Wales and though doubtless many factors contribute to the explanation for this fall, it is felt that economic difficulties combined with inadequate housing accommodation would top the list.

DEATH RATES (per 1,000 estimated population).

	1949	1948
All Causes. (Corrected Death Rate - 13.6). Crude Death Rate -	12.3	9.8
Zymotic Diseases.	0.05	0.21
Tuberculosis of Respiratory System.	0.5	0.26
Other Forms of Tuberculosis.	0.05	0.00
Respiratory Diseases (excluding T.B.)	1.35	0.99
Cancer.	1.97	1.57
Heart and Circulatory Diseases.	3.7	3.24
Puerperal Causes (per 1,000 live and still births):-		
Puerperal Sepsis.	0.00	0.00
Other Puerperal causes.	0.00	2.87
Death Rate of Infants under one year of age:-		
All infants per 1,000 live births.	29	32
Legitimate infants per 1,000 legitimate live births.	30	32
Illegitimate infants per 1,000 illegitimate live births.	0.0	0.00
Death rate of infants from diarrhoea under two years of age per 1,000 live births.	3.18	11.80

Number of Deaths from Diarrhoea under two years of age (1949)

Male	Female	Total
-	1	1

DEATH RATES OF INFANTS UNDER TWO YEARS FROM DIARRHOEA.
per 1,000 live births.

	1946.	1947.	1948.	1949.
Normanton.	2.87	10.00	11.80	3.18
England and Wales.	4.40	5.8	3.3	3.00

The deaths of infants under one year of age were:-

	Male	Female	Total
Legitimate.	5	4	9
Illegitimate.	-	-	-
	5	4	9

DEATH RATES OF INFANTS UNDER ONE YEAR.

	1946	1947	1948	1949
All infants per 1,000 Live Births.				
Normanton.	46.00	55.00	32.0	29
England and Wales.	43.0	41.0	34.0	32.0
Legitimate Infants per 1,000 legitimate live births.				
Normanton.	46.0	56.0	32.0	30
Illegitimate Infants per 1,000 illegitimate live births.				
Normanton.	0.00	0.00	0.00	0.00

COMPARATIVE STATISTICS 1949

	Normanton.	England and Wales.
Birth Rate (per 1,000 resident population).	16.4	16.7
Still Birth Rate (per 1,000 resident population)	0.41	0.39
Infant Mortality Rate.	29	32
Maternal Mortality Rate:-		
(1) Puerperal Sepsis.	0.00	0.11
(2) Other Maternal Causes.	0.00	0.71
Total (1 and 2)	0.00	0.82
Death Rates per 1,000 civilian population:-		
All causes	12.2	11.7
Whooping Cough.	0.00	0.01
Diphtheria.	0.00	0.00
Influenza.	0.05	0.15

DEATHS.

Male	Female	Total
136	99	235

CAUSES OF DEATH.

(Deaths taken from the Registrar General's Tables)

	1949			1948		
	Male.	Female.	Total.	Male.	Female.	Total.
Typhoid and paratyphoid fevers.....	-	-	-	-	-	-
Cerebro-spinal fever.....	-	-	-	-	-	-
Scarlet Fever.....	-	-	-	-	-	-
Whooping Cough.....	-	-	-	-	-	-
Diphthoria.....	-	-	-	-	-	-
Tuberculosis of respiratory system....	7	3	10	4	1	5
Other forms of Tuberculosis.....	-	1	1	-	-	-
Syphilitic diseases.....	1	-	1	1	-	1
Influenza.....	-	1	1	-	-	-
Measles.....	-	-	-	-	-	-
Acute Poliomyelitis & Polioencephalitis.	-	1	1	-	-	-
Acute infectious encephalitis.....	-	-	-	-	-	-
Cancer.....	22	16	38	19	11	30
Diabetes.....	1	1	2	1	2	3
Intra-cranial vascular lesions.....	19	16	35	11	6	17
Heart Diseases.....	34	28	62	28	30	58
Other diseases of the circulatory system.....	5	4	9	2	2	4
Bronchitis.....	11	7	18	4	5	9
Pneumonia.....	3	3	6	4	2	6
Other respiratory diseases.....	1	1	2	4	-	4
Ulcer of stomach or duodenum.....	-	-	-	1	1	2
Diarrhoea (under 2 years).....	-	1	1	2	2	4
Appendicitis.....	-	-	-	-	-	-
Other digestive diseases.....	1	2	3	-	2	2
Nephritis.....	3	1	4	1	2	3
Puerperal and post-abortional sepsis..	-	-	-	-	-	-
Other Maternal causes.....	-	-	-	-	1	1
Premature Birth.....	1	1	2	-	1	1

CAUSES OF DEATH (Contd.)

	1949			1948		
	Male.	Female.	Total.	Male.	Female.	Total.
Congenital malformations, birth injury etc.	1	1	2	2	3	5
Suicide	-	1	1	-	-	-
Road Traffic accidents	2	-	2	2	-	2
Other violent causes	6	2	8	2	1	3
All other causes	18	8	26	14	13	27
Totals.	136	99	235	102	85	187

The crude death rate for the year under review has shown a marked rise and this broadly speaking can be accounted for mainly from the increased number of deaths resulting from respiratory and circulatory conditions and from new growths. The Registrar General after a lapse of a number of years, has once again issued a comparability adjusting figure for Normanton and by means of this factor which makes allowances for age and sex distribution, we are enabled to arrive at a comparison between the Local and National Death Rates. Our crude death rate is 12.3 but by means of the comparability factor it has been stepped up to 13.6. It is of interest to note in passing that during 1949 the number of deaths resulting from Infectious Diseases has been very low and such diseases as Scarlet Fever and Diphtheria, Measles and Whooping Cough, Cerebro-spinal fever and Enteric groups, have not yielded a single death, but it is a sign of the times that Poliomyelitis has claimed one victim. Deaths from all forms of Tuberculosis have shown an appreciable increase over the preceeding year. Three most happy features of this report relate (1) to the Maternal Mortality Rate from which there has not been one death during the year, (2) to the Infant Mortality Rate, and (3) to the Death Rate from Diarrhoea of Infants under two years of age, both of which latter conditions have shown a marked decline from the previous year. The local Death Rate for diarrhoeal conditions for children under 2 years of age (3.18) is only slightly higher than the comparable figure for England and Wales (3.0) while our Death Rate for all infants under one year of age is appreciably below the national figure, i.e. 29 against 32, and does not include one illegitimate death.

TUBERCULOSIS.

Notifications	New Cases.				Deaths.			
	Pulmonary.		Non-Pulmonary.		Pulmonary.		Non-Pulmonary.	
	M.	F.	M.	F.	M.	F.	M.	F.
At all ages.	11	9	2	1	6	3	-	-
Under 1 year.	-	-	-	1	-	-	-	-
1 - 5	-	-	1	-	-	-	-	-
5 - 10	-	-	1	-	-	-	-	-
10 - 15	-	-	-	-	-	-	-	-
15 - 20	-	2	-	-	-	-	-	-
20 - 25	-	-	-	-	1	1	-	-
25 - 35	1	4	-	-	1	2	-	-
35 - 45	3	2	-	-	1	-	-	-
45 - 55	2	-	-	-	1	-	-	-
55 - 65	4	-	-	-	1	-	-	-
Over 65	1	1	-	-	1	-	-	-

Comparison between numbers on Tuberculosis Register in 1948 and 1949.

	1948			1949		
	Pulmonary.	Non Pulmonary.	Total.	Pulmonary.	Non Pulmonary.	Total.
(a) Number of cases on register 1st January.	79	24	103	64	18	82
(b) New cases notified during the year.	19	4	23	20	3	23
No. of cases restored to register.	-	-	-	4	-	4
(c) Totals.	98	28	126	88	21	109
(d) No. of cases removed from register during Year.	34	10	44	12	-	12
(e) No. of cases left on register at the end of the year.	64	18	82	76	21	97

TUBERCULOSIS.

During the last Century there has occurred all over the country a most noticeable drop in the incidence of all forms of Tuberculosis and it has been gradual. The pattern which has been set up nationally, has also been found to apply locally in Normanton and at the end of 1949, there was found to be a total of 97 cases on the register. This is an increase of 15 new cases on the register as compared with the end of 1948 and this increase, regrettable though it may be, is very probably explained by the fact that nowadays such cases are found early as a result of the more modern forms of diagnosis as well as by the field work done by the Mass Radiography Units. The supervision of contacts too is pursued with a characteristic vigour nowadays, impossible of attainment in former years and yields a further quota. In years gone by Pulmonary Tuberculosis acquired a terrible and most sinister reputation as being a killing disease and such a reputation once acquired is difficult to live down, even though the incidence and killing power of the disease has in the meantime been greatly minimised, largely amongst other things as a result of improved living and working conditions. The fatalistic attitude towards this disease adopted not so very long ago is giving place to a much more healthy attitude of mind that, caught early, Tuberculosis can be cured. It is of interest to note that 50% of the new cases of Pulmonary Tuberculosis notified during 1949, occurred in the 25 to 45 age groups. There can be no doubt that the enlightened policy of this Council to make available to families where T.B. exists, houses in a healthier environment will undoubtedly make its presence felt in curbing the disease, though it must be confessed that, owing to the present housing shortage, one cannot go as far as one would wish.

Bovine Tuberculosis still continues to take its annual toll of cases both as regards fresh notifications and as a cause of death, and the ever growing need for the protection of milk by the creation of a greater number of T.T. herds and by the increased use of pasteurisation, will become more and more apparent as time goes on.

There is building up a generally accepted belief that Pasteurisation of milk gives protection only against infections of a bovine Tuberculosis nature but this amounts to only half the truth. Efficient pasteurisation of milk most certainly does protect it against bovine Tuberculosis, but also against a number of other diseases which can gain access into the milk. Extensive outbreaks of diphtheria, of Scarlet Fever, and of septic sore throats have before now been initiated as a result of milk being directly infected by a person carrying the disease and in close contact with milk or coughing into it, or the udder itself may become infected resulting either in an infective mastitis or an infective ulcerated condition of the teats. Similarly milk has also been contaminated either by a carrier or by someone suffering from the disease of enteric fever and dysentery, resulting in an outbreak of the disease. It will thus be seen that pasteurisation efficiently carried out, can render a milk safe from quite a number of infections, nor does it materially alter the chemical composition of the milk. Certain of the Vitamins may be slightly reduced as a result of pasteurisation but such a reduction is more than made up for from other sources.

Milk sampling with particular emphasis on biological testing to discover the presence of Tuberculosis in milk has been carried out during the year in the Public Health Department, both as regards raw milk, or raw milk for pasteurisation and on one occasion at least has been the means of bringing to light the presence of an infected animal in a dairy herd of cattle, and needless to say has resulted in the ultimate removal of the infected animal from the herd in question.

NOTIFIABLE DISEASES (OTHER THAN TUBERCULOSIS) DURING THE YEAR 1949 SHOWN IN AGE GROUPS.

Notified Diseases.	Under 1 yr.	1 - 3	3 - 5	5-10	10-15	15-25	25 & over.	No Age.	Total.	Removed to Hospital.	Deaths.
Measles.	19	103	143	137	2	-	1	-	405	-	-
Whooping Cough.	7	26	28	28	1	-	-	-	90	-	-
Diphtheria.	-	2	1	1	-	1	1	-	6	6	-
Scarlet Fever.	-	7	17	14	5	1	-	-	44	43	-
Acute Poliomyelitis.	-	1	-	1	-	-	-	-	2	2	1
Acute Polioencephalitis.	-	-	-	-	-	-	-	-	-	-	-

Notified Diseases.	0 - 5	5 - 15	15-45	45-65	65 & over.	No Age.	Total.	Removed to Hospital.	Deaths.
Dysentery.	-	-	-	-	-	-	-	-	-
Cerebro Spinal Meningitis.	-	1	-	-	-	-	1	1	-
Malaria.	-	-	-	-	-	-	-	-	-
Erysipelas.	-	-	-	2	-	-	2	1	-
Pneumonia.	6	2	9	3	7	-	27	-	6
Puerperal Pyrexia.	-	-	1	-	-	-	1	1	-
Ophthalmia Neonatorum.	-	-	-	-	-	-	-	-	-
Gastro Enteritis.	-	-	-	-	-	-	-	-	-

NOTIFIABLE DISEASES (Other than Tuberculosis)

The incidence of measles was marked during the year, amounting in all to a total of 405 cases, but against that the total number of whooping cough cases notified was below 100. Scarlet Fever has also shown a decided decline (44) as compared with the previous year when there were 80 cases, and Diphtheria has once again shown a further pronounced reduction. One can scarcely credit the fact that in 1941 in Normanton there were 56 cases of diphtheria, whereas in 1949 only 6 cases were notified. The success of our immunisation campaigns can readily be seen behind all this and our ultimate goal must be the complete eradication of Diphtheria from our midst. This can only be achieved by a continuous programme of immunisation, continually spurred on by the helpful propaganda of our Doctors and Nurses and not least by all those in a responsible position and able to do so.

PUBLIC WATER SUPPLY.

Supply.

Water is purchased in bulk from Wakefield County Borough. A maximum of 505,000 gallons per day being available. This water is soft in character having a temporary hardness of 0.2 degrees, a permanent hardness of 3.6 degrees and a total hardness of 3.8 degrees.

Purification.

Purification is carried out at the Wakefield Waterworks and no further local treatment is given to the water.

Consumption.

In 1949 the average daily consumption for the Normanton Urban District was 441,950 gallons per day, for which 361,225 gallons were used for domestic purposes and 80,725 gallons per day industrially.

All houses with the exception of one farm house and one farm cottage receive water from the Towns main; three houses being supplied from communal stand pipes.

MATERNITY AND CHILD WELFARE.

During this, the first full year under the Divisional Scheme, there has been little of a spectacular character to note, and our policy has been directed towards consolidating existing services, as well as making one or two excursions of a novel character.

It is a lamentable fact that our progress in the erection of suitable Ante-natal and Infant Welfare Clinics has not been able to keep pace with our progress in the reduction of maternal and infant mortality, and dark and dingy premises, as well as those of an unsuitable nature, do not constitute an ideal attraction for regular attendance at such clinics. Neither the clinic at the Park Pavilion, Normanton, nor the one at Altofts, can be regarded as ideal premises for the housing of such clinics, though it must be agreed that the former mentioned one does offer the greater facilities. Perusal of my report will show that all the clinics do serve a most useful purpose, and in view of their popularity, combined with the fact that we as a Local Health Authority should set an example to mothers in creating an all round friendly atmosphere, the proper provision of suitable premises becomes an imperative necessity. Life in an industrial area often lacks variety, and a means of escape to a friendlier atmosphere where all can meet on an equal footing and talk over their various problems, is much appreciated. The siting of the clinics in Normanton is, on the whole, quite good, except that I must again stress the fact that an additional clinic situated more towards the Wakefield boundary is urgently required, so as to save mothers having to make their way as at present through two thirds of Normanton before arriving at the central clinic. There has been a drift of the population, too, towards that part of the town owing to the new housing schemes now in progress, and this constitutes an additional reason for the provision of such a clinic.

Because of the lack of adequate electricity supplies, Normanton has so far been unable to enjoy the facilities of an independent Ultra Violet Light Clinic but has had to join forces with Castleford at the Sagar Street Clinic. Thus Normanton patients in need of such treatment provisionally go to Castleford. This Clinic was re-opened in February of this year and operated in the first instance for the 0 - 4 and 5 - 15 age groups, and has proved to be a most popular clinic. Later, in November, this Sunlight Clinic was extended to cover the Ante-natal and Breast Feeding mothers, and in selected cases, instruction and advice is given how to prepare the breasts in preparation for the baby to come. In a Division like mine where the tendency to get the baby on to the bottle as soon as possible is most noticeable, every effort should be made to initiate anew the art of natural breast feeding. Even after only two months working, it has become quite apparent that a special clinic on its own to impart the basic principles of breast feeding although an urgent necessity, would not enjoy the same popularity as a combined Breast Feeding and Ultra Violet Light Clinic. It is somewhat early to attempt to analyse the results of this Clinic, but there is evidence that it is fulfilling a most useful purpose. It is earnestly hoped that during 1950 the necessary electricity cable will have been laid at the Park Pavilion and so enable Normanton residents to enjoy these facilities the more readily.

Though more properly coming under the heading of Diphtheria Immunisation, it would probably not be out of place to state here in passing, that a most successful campaign was launched and carried on in this Division during August and September when a Mobile Unit Immunisation Van toured the constituent districts. That there exists a need for such a service cannot be doubted, and I feel that it provides in a goodly measure indeed, an answer to a long outstanding problem.

In the succeeding pages, I have set out details of the working of the various services in this Division and in some instances have elaborated on matters mentioned above.

CHILD WELFARE CENTRES.

Centre.	Days & times of sessions.	No. of sessions during year.	Attendances.				Attending for 1st time.	
			0 - 1	Average per Session.	1 - 5	Average per Session.	0 - 1	1 - 5
Altofts Y.M.C.A., Church Road, Altofts.	Wednesdays, 2 pm. to 4 pm.	49	1099	22	632	13	40	2
Normanton, Park Pavilion.	Tuesdays & Thursdays, 2 pm. to 4 pm.	97	3382	35	1607	17	214	37
Totals.		146	4481	31	2239	15	254	39

Perusal of this table will show that the mothers in Normanton take a keen interest in their local Child Welfare Centres and attend regularly. The Doctors and Health Visitors on their side, make every effort to gain the confidence of the mothers, giving when requested, ready information and advice regarding feeding problems etc., and in this way providing a useful introduction for the dissemination of matters of an educational and preventive nature. It is felt that these clinics do provide an easy avenue of approach whereby mothers can readily avail themselves of the services of the Health Visitors etc., on specified days and full use is made by them of this facility.

ANTE-NATAL CLINICS.

Centre.	No. of Sessions.	No. of Attendances.	Average per session.	No. attending for 1st time.
Normanton, Park Pavilion.	51	800	16	135

Attendance at the Ante-natal Clinics has been sustained during the year and there is distinct evidence that they are holding their own. The usual facilities of an Ante-natal Clinics are made available to these women, and in addition, where a mother expresses a desire to be able to Breast Feed her baby either by reason of a nipple abnormality or otherwise, she is referred to our special Ultra Violet Light and Breast Feeding technique Clinic.

Details are given below of the proprietory brands of foods etc. which were available at cost price to all women attending the Clinics:-

Adexolin Tablets.
Robrex.
Ambrosia Lactation Tablets.
Arachis Oil.
Maltoline Iron.
Bemax.
C.L.O. Malt.
C.L.O. Emulsion.
C.L.O.
Cow and Gate (Full cream).
Colact.
Farex.
Glucose.
Horlicks.
Lactagol.
Liquid Paraffin.
Scotts Baby Food.
Minadex.
M.O.F.
Ovaltine.
Ostermilk No.1.
Ostermilk No.2.
Parrish's.
Robaleine.
Robinson's Groats.
Trufood Humanised.
Virol.
F.S. Tablets.
Wheat Germ.
I.C.D. Tablets.
Blaud's Pills.

DOMICILIARY MIDWIFERY SERVICE.

The Midwifery Service has by and large become a closely integrated section of the Divisional Scheme and we have been lucky in being able to maintain it at full strength throughout the year, in the face of considerable staff changes and re-organisation. A close liaison is maintained between the midwives and the Doctors attending the Ante-natal Clinics and this has reacted to the interests of both parties.

In my last report I expressed concern at the small number of women availing themselves of the Gas and Air Analgesia service and every effort was made during the year to popularise it by the midwives on the district and by demonstrations at the Ante-natal Clinics. In order to assess the actual need for this service, the midwives were from September onwards, asked to submit a weekly return to me, setting out the reason why certain women did not wish or could not have this form of analgesia, and these returns have indicated a real appreciation of the service.

Total No. of deliveries - as midwives	-	197
Total No. of deliveries - as maternity nurse	-	10
Total No. of patients ante-natally examined	-	324
Number of cases delivered under Gas and Air Analgesia	-	73
Percentage of Women having Gas and Air Analgesia	-	37%

ILLEGITIMATE BIRTHS.

Total Illegitimate Births	12
Premature Illegitimate Births	-
Illegitimate Still Births	-
Illegitimate Deaths	-
Adoptions (so far as can be ascertained)	1

It is but rarely the assistance of this Department is sought to provide practical help in the case of illegitimate pregnancies and furthermore once the initial shock of the irregularity has been recovered from by all concerned, the advent of the baby into its new surroundings is not usually one fraught with antagonism. The mothers are encouraged to attend our Infant Welfare Centres, and once it is realised by them that no publicity is given to their particular case, as a rule they attend with enthusiasm. On the district, too, the Health Visitors give preferential treatment to such cases. Our records indicate that adoptions were completed in only one case, and it would seem that the greater number of mothers of such children prefer to rear them themselves.

PREMATURE INFANTS.

		Died.
No. of premature infants born at home and nursed at home	- 9	3
No. of premature infants born at home and nursed in Hospital	- [illegible]	1
No. of premature infants born and nursed in Hospital	- 5	1
	15	5

The Relief Midwife in Normanton is Sorrento trained by reason of which fact she is able to bring to bear the most recent knowledge on the care and supervision of such children, and there exists a most close liaison between the Domiciliary and the Relief Midwives and later the Health Visitors when a premature birth occurs. Prompt notification of these births to the Divisional Office, enables the Divisional Medical Officer to exercise close administrative control over such children.

VACCINATION.

Number of Persons Vaccinated (or re-vaccinated) during Year.

	Under 1 yr.	1 - 4 years.	5 - 14 years.	15 or over.	Total.
No. Vaccinated.	9	11	-	5	25
No. re-vaccinated.	-	-	1	5	6

TUBERCULOSIS - MASS RADIOGRAPHY.

Mass radiography nowadays so largely used in industry in the diagnosis of Pulmonary Tuberculosis and other chest conditions, is becoming more and more an integral part of Industrial medicine, and by reason of its vast possibilities, I feel the incorporation of such a service, in a highly industrialised area such as Division 11, is a very necessary step indeed. For the past year or so, in collaboration with those responsible for this service, I have been investigating all the possible sites where such a clinic could be held, but by reason of the high electric current necessary to feed the plant, few if any central suitable premises are suitable. The only obvious ray of light in this direction at present perceivable that could work satisfactorily, would result from the utilisation of our Infant Welfare Centre at the Park Pavilion, Normanton, when electricity is available and they are not otherwise required, and every effort is being made to enable some such course to be adopted. So far however, such a course of action is only at consideration level and it will be some time before concrete action can be taken.

DIPHTHERIA IMMUNISATION.

		0 - 4		5 - 15	
		Primary.	Refresher.	Primary.	Refresher.
No. of Children Immunised.	1948.	347	10	376	828
	1949.	445	8	341	443

No. of Primary Immunisations.		No. of Booster Immunisations.	
1948	723	1948	838
1949	786	1949	451

		1948	1949
No. of children immunised.	0 - 4	357	453
	5 - 15	1204	784
		1561	1237

Report of a Successful Pilot Mobile Unit Immunisation Campaign carried out in Normanton and Castleford during August and September, 1949.

During the past 8 or 9 years, there has been waged by means of Immunisation against Diphtheria, a nation wide campaign, the object of which has been primarily to lower the incidence of, and ultimately to bring about the complete eradication of, Diphtheria from our midst. The success of this campaign has varied from area to area, depending largely on the intensity of the individual local efforts, but taken by and large, the overall results have been most gratifying. Thus it is of interest to note that in England and Wales during 1938, 64,955 cases of Diphtheria were notified, with 2931 deaths, whereas in 1948, 7903 cases were notified with 156 deaths, the two latter figures being uncorrected. These figures both as regards notifications and mortality rates for this disease, show a deep downward spiral, and this should continue till the rates are eventually negligable. The monumental immunisation campaigns carried out in Toronto and Hamilton, Canada, over a period of years has shown that Diphtheria can be well nigh completely eradicated from urban communities, but to attain this happy position requires a set up in which there are no flaws. With communities in this country, where protective immunisation has been successfully practised on a large scale over a number of years, it has been found that whilst it is a relatively easy matter to obtain high immunisation rates in the 5 - 15 age groups even up to 96%, it is difficult to obtain comparable rates in the 0 - 4 age group, and a 68% rate would be considered quite good. If it is our avowed intention to eradicate Diphtheria from our midst, then this lower percentage rate of successful immunisations in the younger age groups must be viewed with alarm, and we should not rest till the percentage gap between the two groups has been narrowed.

The success of our immunisation programme in the past, has depended on how far we have been able to popularise our static immunisation clinics, either as part of our Maternity & Child Welfare Service, or as an integral part of the School Medical Service. Provided we can once enlist an intelligent interest on the part of our Health Visitors and other nursing staff, as a very necessary addition to the multiplicity of interests they are already expected to shoulder, and provided we can sustain that interest during the daily routine, then we can say that more than half the battle has been won. Ready co-operation on the part of the parents in an effort of this sort is also a very vital necessity. The better immunisation results obtained in the 5 - 15 age group can undoubtedly be attributed to two important contributory factors, the one, and to my mind the more important one, depends on the fact that once having given consent, the parent can take a completely impersonal view of any further proceedings, since the actual immunisation takes place in school where her attendance is not required and the other is the psychological effect on the child of not wanting to be the odd man out amongst so many others. Success also depends on the avoidance as far as possible, of widespread reactions by the use of appropriate antigens, and it is no exaggeration to say that one really bad reaction in a school can do untold harm in militating against what otherwise would be a most successful run of immunisations. Obviously owing to the lower immunisation percentage obtained, the same set of factors cannot operate in the case of the 0 - 4 age group and one can readily imagine the amount of moral courage the mother must pluck up before she can bring her child to be immunised, either in her own presence or in an adjacent room. The fact that she does come forward and readily so is striking testimony to the faith she has in the efficacy of immunisation against diphtheria, but it is just as true to say that a certain section of the mothers in this age group, cannot because of domestic ties etc., or will not, bring their children to be immunised at the static clinic and a means must be found sooner or later, if we are to be completely successful in our efforts, to bring them inside

our not. One very practical way of meeting and overcoming this problem has been found to be by the institution of a mobile immunisation unit which will take immunisation to the very doors of the children and in this way shatter the very last vestige of an excuse that these parents may have against the immunisation of their children. This method is not entirely novel since it has been in operation in several County Boroughs and at least in one County Council for a number of years now, but it has not yet attained universal popularity. In view of its flexibility and extreme adaptability it was decided to operate a pilot service of this type in Division 11 of the West Riding to test its suitability in this area, and the very favourable results obtained during its trial run, merit particular consideration with a view to its continuance. During the four Fridays of August, 1949, a first visit was paid to areas of the constituent districts comprising this Division, and a second visit was paid in the four Fridays of September, to complete the second injections. In all, 16 sessions were carried out, and it was found that a total of 1116 injections were given working out at 70 injections being given per session. Furthermore in the light of experience gained during this pilot survey, it was found that provided the details had been properly worked out beforehand, a total of 80 injections per session could be attained without undue strain on the personnel. It will be seen that this number compares very favourably with the work as is carried out at a static immunisation clinic, where it is, I think, generally agreed that 20 per session is considered about the average. Such a static clinic will immobilise a Doctor and two nurses, whereas the mobile immunisation clinic will immobilise a Doctor and five nurses, and the latter system whereby 4 times the number of children can be immunised quite apart from effecting a very considerable saving in the Doctor's time, also sets free 3 nurses to do other work. This I think demonstrated quite clearly that far from being an economically unsound proposition, the mobile unit can be used to a very great advantage and need not clash in any way with the more conventional static clinics, being essentially auxilliary to them. The success of this pilot survey was not in any way fortuitous but the result of a carefully planned scheme where emphasis laid on details was found to count for a lot in contributing to the final figures. Of prime importance is the size of the van where the immunisations are carried out, and this must be in all respects adequate to allow the work to be carried out unhampered and with sufficient "elbow room". One of the larger types of ambulances with an additional door at the cab end to allow of one way traffic would serve as a temporary measure but I do feel that eventually a more roomy type of vehicle, perhaps one after the style of the mobile dental van, would be found to be much more desirable. It was shown very conclusively during the experimental run that if the working space available was cramped and inadequate, frustration and irritation at once ensued. Next in order of importance is the provision of a sufficiency of personnel to feed and keep the unit going. In some mobile units a Doctor and two nurse combination is considered adequate but to my mind this reacts detrimentally as regards the actual number of children who can be immunised per session. The doctor and two nurse system was tried out originally in our pilot scheme but half way through the first session it was found to be absolutely impracticable and to avoid a complete collapse of the scheme, additional nurses had to be rushed along to give assistance. It was discovered at subsequent sessions that a Doctor assisted by two nurses in the van and three acting as auxilliaries, so ensuring a steady flow to the van, gave the maximum co-ordination possible. Whilst this unit can be put to the best economic advantage in a populous urban area, there is no reason whatsoever why it should not be used to carry immunisation to outlying areas, and here the Doctor and two nurse combination would probably be used to better advantage. Before the unit can be expected to function successfully, a vast amount of preparatory work must be carried out by the Health Visitors, the office staff selecting those children whose parents cannot or will not bring their children to the static clinics, and the further work carried out by the Health Visitors who personally contact each parent beforehand notifying

them that the van will be round on a certain day later on in the week. A few days before the unit tours the district, a Loud Speaker Van touring the selected districts, further notifies all the residents in the district that the unit will visit that district on the selected day and then later when the unit makes its tour of the district, the Loud Speaker can with equal advantage be mounted on the vehicle and operated by the driver who should be accustomed to this type of broadcasting. The use made of this mobile unit immunisation van will probably vary from Division to Division, but it should undoubtedly fulfil a definite need in all of them. Indeed it is felt when once the vast potentialities of this set up are appreciated and full use is made of it, the services of more than one unit will probably be required to satisfy all the demands put upon it. It may be that experience will dictate that a smaller type of vehicle can appropriately be used in serving the needs of scattered rural areas though it must be emphasised again that a commodious type of vehicle should definitely be employed where congested urban populations are to be catered for. It must not be forgotten that this type of set up is restricted to functioning during the summer and autumn months and any attempt to extend it for a longer period than that will inevitably be doomed to failure. Indeed even so I feel that September is late enough. The question of securing efficient sterilisation of needles, swabs etc. will also have to be given consideration because it will be found practically impossible to carry this out when the unit is in operation and the provision of a small but efficient portable autoclave should be given serious consideration.

The future progress of immunisation will almost certainly depend on consolidating and effecting improvements on existing methods. The main brunt of the attack must still and always will be borne by the static immunisation clinic which attack it can sustain by reason of the fact that it can fuction independantly of the weather be it summer or winter, and the mobile unit can be called into use as an auxilliary method to deal with what may be called the problem type of immunisation. It has often been lamented that a greater measure of success could be expected if children could be immunised at an earlier age than is at present practised and recent experimental work has tended to bring this hope within the bounds of practicability. Mass immunisation methods and the relative absence of clinical Diphtheria on any scale over the last few years, have tended to lower the average immunity of the mother resulting in a lower transmitted immunity in the child. At one time it was accepted practice to immunise children at the age of 1 year which was subsequently reduced to 8 months, but recent work has shown that in many cases this can be lowered to 3 or 4 months of age. Experimental work along these lines is being carried out in Division 11 but as such work is at present in the very early stages, further discussion will have to be reserved till a further report. Should it be proved successful then another useful weapon will be placed at our disposal in that we shall be able to exercise a greater influence on the mother to have her child immunised at the time she is most impressed by the assistance afforded her at the Child Welfare Clinic, namely between the 3rd and 6th months.

HOME HELP SERVICE.

A. Total number of Home Helps available at 1st January, 1949 - 12

Total number of Home Helps actually employed during 1949 - 25

Total number of Home Helps available at 31st December, 1949 - 21

B. Number of cases provided with Home Helps during 1949 -

Type of Case.	
Illness.	34
Lying-in.	82
Expectant Mothers.	7
Aged.	4
	127

As the above figures will indicate, the Home Help service in Normanton is a very popular one and fulfills a very definite social need in the community.

HOME NURSING SERVICE.

The Home Nursing Service has enjoyed a most successful season and there has been a considerable increase in the gross number of new cases during the year as well as in the total number of visits made.

Comparison between work done during 1949 (Table A) and that done between 1st April, 1947, and 31st March, 1948 (Table B), shows the vast increase in work undertaken by these Nurses.

A.		B.	
No. of cases.	Total No. of visits.	No. of cases.	Total No. of visits.
510	9565	523	7774

SCHOOL HEALTH SERVICE.

School Medical Inspections.

The outstanding arrears of previous years have been satisfactorily dealt with and every effort is now being made to formulate a policy which will conform to statutory requirements. The services of the part-time medical staff were dispensed with at the end of March but it was not until October that a second full-time Assistant County Medical Officer was appointed. All the schools in Normanton were covered.

No. of Schools.	No. of Schools Inspected.	
	1948	1949
17	10	17

School Population (Feb.1949)	No. of Children Inspected.	
	1948	1949
3212	705	1537

Nutrition - 1949.

	Number.	Percentage.
A. (Good)	795	58.03%
B. (Fair)	540	39.41
C. (Poor)	35	2.56

Total of Individual Pupils Referred for Treatment.

1948	1949
46	190

Minor Ailments Clinics.

The Minor Ailments Clinic is situated at the Park Pavilion, Normanton, and operates on Monday, Tuesday, Wednesday and Friday mornings.

Defects Treated.	Total No. of Attendances.
332	1247

Eye Clinics.

Eye Clinics are conducted at Normanton (Modern School) and sessions were held at irregular intervals, these being arranged through the County Medical Officer's Department. Later in the year however, it was arranged for Dr. Wittels to visit this Division every Thursday until further notice, the first clinic being held on 15th December. The comparable figures for 1948 and 1949 are as follows:-

1948	1949
No. of Children Examined.	No. of Children Examined.
154	144

1948	1949
Children Prescribed Spectacles.	Children Prescribed Spectacles.
93	84
No. referred for Operative Treatment.	No. referred for Operative Treatment.
-	1
No. of Sessions held.	No. of Sessions held.
15	11

CONCLUSION.

I beg to offer my sincere thanks to the Sanitary Inspector for his co-operation during the year, to the Surveyor for supplying details incorporated in this report, and to the staff of my department, both professional and clerical for their able assistance to me during the year.

Yours faithfully,

J. M. Paterson.

Medical Officer of Health.

To the Chairman and Members of the Normanton Urban District Council.

I have the honour to present to you my Fifth Annual Report for the year 1949, summarising the work carried out by the Sanitary Department.

The total Sanitary Provisions for the District.

The total number of habitable houses at the end of the year.	5480
Number of Water Closets.	5790
Number of Waste Water Closets.	25
Water Closets flushed by Automatic Tanks.	3
(Seven of this type have been converted to separate W. Cs during the year).	
Chemical Closets.	18
Privy Middens (covered).	7
(Seven of these have been converted to chemical closets and dustbins. 9 chemical closets have been provided in lieu of same).	
Cesspools.	3

Two drainage systems previously draining into cesspools have been connected to the sewer and the cesspools filled in. These were the cesspools at the Drill Hall and Garth House Club. They were the last remaining cesspools in the old Normanton Urban District. The difficulty of connecting the former was overcome by the use of cast-iron drainage above ground level to obtain fall to an existing sewer and the latter by the extension of the sewer system for the Garth Estate.

Number of Septic Tanks.	2
Total number of houses not connected to sewers.	40
Percentage of closets on water carriage system.	99·5%

All closets capable of conversion to water closets and of connection to the sewers have been dealt with. Further progress has been made in the abolition of privies and it is sincerely hoped the remainder will be dealt with this year. The Council empty the chemical closets and replace with a charge of chemical. There was an increase of 67 water closets during the year. This was due to building of new houses and provision of extra W. Cs. in existing houses.

Water Supply.

The whole of the water supply is obtained in bulk from Wakefield Corporation. It is filtered and chlorinated by the supplying authority.

The consumption was - September 1948 to September 1949:-

Altofts.	40·850
Normanton.	137·591
Total.	178·441 thousand gallons.

The cost worked out at 1s 3d per 1000 gallons. The consumption per head of the population was 25·73 gallons per day.

There are only two houses in the District not on piped supply. They draw their supplies from two shallow wells. These supplies are unsatisfactory and the tenants have been warned to boil the water before use. Three of the Canal Lock houses are supplied by stand pipes.

27 bacteriological water samples were taken and 1 chemical water sample during the year. All were satisfactory and showed an excellent water both from a bacteriological and chemical viewpoint.

Swimming Bath.

10 bacteriological samples of swimming bath water were taken - all proved satisfactory. The bath was well conducted at all times.

House and Trade Refuse Collection and Disposal.

The following figures show the number of refuse receptacles in use at the end of the year.

Wet Ashpits in connection with privies.	7
(This shows a reduction of four during the year).	
Dry Ashpits.	6
(This shows a reduction of 4. Forty four dustbins having been provided in lieu of same).	
Total No. of dustbins.	6009

The question of the responsibility for providing dustbins was again brought forward by one or two Court decisions. The Public Health Act states that the Notices to provide bins must be served on the owner or occupier. In certain decisions the owners successfully appealed against the Notices requiring them to provide dustbins. It would appear from these decisions that the Council must investigate the introduction of a Municipal Dustbin Scheme to provide the whole of the bins for the area. There are two methods to recover the cost:-

1. By an annual charge made on the owners. The maximum charge permitted under the Local Authorities (Charges for Dustbins) Order, 1949 being five shillings.
2. By a direct charge on the rates.

The only alternative would appear to be to serve Notices on the occupiers. Good bins are essential to maintain a satisfactory cleansing service and the position at present is doubtful and will become worse as more and more bins deteriorate.

No. of lorry loads collected and disposed.		3482
Estimated weight of refuse.		8000 tons.
Approximate cost per ton.		16s 10d
Cost per rate	First half year.	11·937 pence.
	Second half year.	12·143 pence.
Total cost of collection and disposal.		£6765

The refuse was disposed of by controlled tipping. From the Normanton, Woodhouse and Common Wards at the St. John's Football Field and the Boundary Tip, Wakefield Road. The use of the football field tip was discontinued due to lack of co-operation. It was almost impossible to keep the tip tidy due to interference by children throwing out tins, old beds etc. The refuse from the Altofts Wards was disposed of at Foxholes Tip. There is tipping space at that site for several years. Present tipping facilities in the Normanton Wards will be filled by about January or February 1951. New tipping space is urgently required. There are several sites available. It is felt however that none of these will be very cheap and a new charge for disposal may arise. Previously the Council have been very fortunate in finding tips at very low cost.

Rat infestation at the Foxholes Tip was successfully dealt with in two treatments. The tips are sprayed weekly with insecticide to prevent insect pests. No real trouble has been experienced during the year.

A wet swampy portion of the Council's field at the rear of Potts Terrace was drained, levelled up with refuse and covered with soil from the adjacent building site. This should form a useful playing area in the future and illustrates how poor land may be reclaimed by tipping. Some of the houses near to this tip were troubled by flies but the infestations were dealt with on complaint and the trouble rectified. The flies were due to the presence in the material being tipped of green-grocer's

waste, fish parts etc.

This complaint of fly breeding leads me to ask the Council to consider the provision of a small incinerator to burn such types of refuse and refuse of animal origin - dead cats, dogs etc. At present we have to bury these types of material which encourage fly breeding and rat breeding in the tips. The incinerator will require to stand on a concrete base in a building of fireproof construction capable of being locked to keep out unauthorised persons. In addition some provision should be provided to store bones. We are at present receiving quite a quantity of bones from butcher's shops as the bone dealers do not collect regularly. These are stored in bins in the open air at present.

The Collection and Disposal staff comprises 3 Drivers, 12 Dustmen, 1 Tipman, 1 Salvage Man and 1 spare labourer. The spare man is essential to maintain a full staff due to absence for sickness.

Protective clothing comprising two sets of boiler suits, one pair of armoured gloves and one pair of goggles has been issued to the Dustmen and Salvage men as a yearly issue. Four Karrier Bantams are in use but only three are constantly on the road, the fourth being retained as spare. The oldest lorry now 13 years old requires replacing by a new lorry. The wagons have given good service and three have constantly been on the road. No outside haulage has been employed at any time.

Amount of Salvage collected during the year.

	Tons. Cwts. Qrs. Lbs.	Value.
Paper.	92 - 1 - 1 - 0	£580 - 19 - 2
Textiles.	2 - 1 - 0	1 - 0 - 0
Bones.	16 - 2 - 0	3 - 18 - 2
Ferrous Metals.	9 - 4 - 0 - 0	35 - 0 - 0
Total.	102 - 4 - 0 - 0	£620 - 17 - 4

The item Ferrous Metals - 9 tons 4 cwts was an accumulation of scrap iron from all Departments but is shown returned as salvage from this Council. The corresponding figures for 1948 were Salvage - total weight 88 tons 13 cwts 3 qrs. and value £562 - 7 - 11. Therefore this year's salvage shows an increase in weight of 13 tons 10 cwts 1 qr and an increase in value of £58 - 9 - 5.

These increases however will not be maintained as the bonus for paper collection will cease and paper will drop to an average of about 5 tons per month. In addition the price of waste paper has dropped from £6 - 7 - 6 per ton to £5 per ton. During the year a contract was made with Thames Board Mills Ltd., Purfleet, Essex to allow them to take the whole of the Council's output for the next five years.

A bonus of £14 - 12 - 6 was claimed from the Directorate of Salvage and Recovery for the months January to June. The Council added £4 - 7 - 6 to make a payment of £1 per man. For the months July to December a bonus of £1 - 9 - 0 has been claimed.

The monthly figures were as follows:-

Paper.

	Tons.	Cwts.	Qrs.	Value.
January.	10	3	0	£64 - 14 - 2
February.	4	15	0	30 - 5 - 0
March.	9	2	0	58 - 0 - 0
April.	9	6	0	60 - 0 - 0
May.	9	4	0	58 - 0 - 0
June.	15	5	0	112 - 0 - 0
July.	4	16	0	31 - 0 - 0
August.	4	10	0	29 - 0 - 0
September.	9	16	0	62 - 0 - 0
October.	5	3	0	26 - 0 - 0

	Tons.	Cwts.	Qrs.	Value.
November.	5	1	0	£25 - 0 - 0
December.	5	0	2	25 - 0 - 0
Total.	92	1	2	£580 - 19 - 2

Rags.

	Cwts.	Qrs.	Value.
December.	2	1	£1 - 0 - 0

Scrap Iron.

	Tons.	Cwts.	Qrs.	Value.
August.	9	4	0	£35 - 0 - 0

Bones.

	Cwts.	Qrs.	Value.
January.	3	2½	18 - 2
October.	5	0	£1 - 0 - 0
December.	8	0	2 - 0 - 0
Total.	16	2½	£3 - 18 - 2

During the year at one stage some difficulty was experienced in disposing of paper to the mills. Several Local Authorities ceased to collect paper and the publicity given to their action by the Press had a harmful effect on the collection of waste paper. This Council has always been able to dispose of its waste paper and has now a guaranteed outlet for 5 years. The paper must be collected from shops and even now any accumulations of clean waste paper are always collected from domestic dwellings.

Public Health Administration.

During the year 866 complaints were received and investigated. Of these 505 nuisances were found. In addition there were 87 outstanding from the previous year.

To deal with this work 3682 visits were made and 1138

houses were inspected. In the majority of cases the original complaint led to further complaints when the block of property was visited. It will be noted that each nuisance entailed on an average almost four visits before it was finally cleared.

438 Informal Notices were served and 424 of these were complied with. 137 cases of non-compliance with Informal Notices were reported to the Sanitary Committee and Statutory Notices served as a result of these reports. 129 of these were complied with.

There were no legal proceedings taken under the Public Health Act during the year.

The summary of complaints dealt with was as follows:-

Roofs reslated.	3
Roofs repaired.	142
Bay window roofs repaired.	5
Dormer roofs repaired.	1
Ridge tiles renewed or refixed.	6
Chimney pots renewed.	16
Chimney pots refixed.	20
New cowls fitted to chimney pots.	2
Chimney stacks rebuilt.	2
Chimney stacks repaired.	8
Chimney stacks pointed.	5
Chimney stacks extended.	1
Chimney flues repaired.	2
Wall brickwork rebuilt.	6
Wall brickwork repaired.	2
Wall brickwork pointed.	6
Wall stonework repaired.	1
Wall stonework pointed.	1
Gable walls pointed.	2
Gable walls treated externally with waterproofing material.	2

Gable walls rendered internally.	1
Gable verges pointed.	3
Gable risers pointed.	1
Eaves gutters renewed.	28
Eaves gutters repaired.	59
Eaves gutters cleansed.	19
Eaves gutters refixed.	2
Rain-water pipes renewed.	29
Rain-water pipes repaired.	44
Rain-water pipes cleansed.	2
Rain-water pipes altered.	2
Rain-water pipes removed.	1
Pavement channels repaired.	2
Damp-proof courses inserted.	2
Drains repaired.	9
Drains cleansed.	134
Drain ends sealed.	2
Drains abolished.	1
Drains relaid.	3
Drains renewed.	1
Drain ventilation shafts renewed.	1
Drain ventilation shafts repaired.	2
Gully dishes renewed.	3
Manhole covers and frames renewed.	7
Manhole covers and frames refixed.	1
Water closets abolished.	1
Water closet roofs reslated.	1
Water closet roofs repaired.	12
Water closet brickwork renewed.	1
Water closet brickwork repaired.	2
Water closet cisterns renewed.	1
Water closet cisterns repaired.	42

Water closet pedestals renewed.	18
Water closet pedestals cleansed.	74
Water closet pedestals secured.	1
Water closet seats renewed.	6
Water closet flush pipe joints renewed.	14
Water closet doors repaired.	3
Water closet doors rehung.	3
Water closet door frames repaired.	3
Water closet door frames secured.	1
W. C. ball taps renewed.	10
W. C. ball taps secured.	1
W. C. ball taps repaired.	6
Burst water service pipes repaired or renewed.	6
Burst water pipes in water closets repaired or renewed.	111
Dustbins renewed.	172
Privy middens converted to chemical closets.	4
Ashpits abolished and chemical closets provided.	4
Latrine buckets renewed.	2
Coalhouse brickwork renewed.	1
Coalhouse brickwork repaired.	1
Coalhouse roofs reslated.	1
Coalhouse roofs repaired.	7
Concrete covers to coal chutes renewed.	1
Brickwork to coal chutes repaired.	1
Wash-house roofs repaired.	2
Beer chute doors renewed.	1
Common yards cleansed.	1
Boundary walls rebuilt.	2
New ceilings.	11
Ceiling plaster repaired.	30
Wall plaster repaired.	57
Wall plaster repaired with waterproofed material.	1

New concrete floors.	5
Floors repaired.	16
Ranges renewed.	2
Ranges replaced with serviceable second hand ranges.	2
Ranges repaired.	3
Ranges reset.	1
Flag covers to ranges renewed.	2
Fireback brickwork renewed.	25
Fireback brickwork repaired.	5
Ovens renewed.	1
Ovens replaced with serviceable second hand ovens.	2
Ovens repaired or saddled.	25
Ovens reset.	3
Aprons secured.	1
Side plates renewed.	1
Jambs secured.	4
Firebars renewed.	10
Drop bars renewed.	7
Bottom grates renewed.	11
New Hell grates.	3
Mantelpieces secured.	1
Sinks renewed.	13
Sinks refixed.	3
Sink edges pointed.	5
Sink-waste pipes renewed.	20
Sink-waste pipes repaired.	11
Sink-waste pipes extended to discharge over gully traps.	16
Setpots renewed.	23
Setpots refixed.	2
Setpots removed and gas boilers provided.	2
Setpot flues repaired.	2
Setpot brickwork rebuilt.	1

Setpot brickwork repaired.	5
Setpot bottom grates renewed.	3
Setpot doors and frames renewed.	1
Window frames renewed.	1
Window frames repaired.	3
Window frames refixed.	3
Window frames pointed externally.	11
Window sashes renewed.	5
Window sashes repaired.	8
Window sashes cased.	8
Sash cords renewed.	90
Catch and fasteners renewed.	17
Fanlights made to open.	1
Doors renewed.	1
Doors replaced with serviceable second hand doors.	3
Doors repaired.	10
Doors cased.	12
Doors rehung.	6
Door frames repaired.	1
Door frames secured.	3
Door frames pointed externally.	4
Door latches renewed.	3
Door locks renewed.	1
Weatherboards renewed.	2
Thresholds renewed.	3
Doorsteps renewed.	2
Doorsteps repaired.	1
Doorsteps secured.	1
Flag covers to cellar heads renewed.	1
Stair treads renewed.	2
Guard rails to staircases renewed.	1
Guard rails to staircases secured.	1
Rent books provided.	1

The summary of Statutory Notices served was as follows:-

Public Health Act, 1936.

Section 39.	Notice to make satisfactory provision for drainage.	17
Section 45.	Notice to repair or cleanse defective closet.	11
Section 65.	Notice in respect of work done in contravention of building byelaws.	2
Section 75.	Notice to provide dustbin.	35
Section 93.	Notice requiring abatement of nuisance.	49
Section 93.	Final notice.	7
Section 277.	Notice requiring information as to interest in premises.	2

Housing Act, 1936.

Section 9.	Notice requiring the person having control of the house to execute works.	4
Section 11.	Demolition Orders.	13
Section 168.	Application for information as to interest in premises.	2

Informal Notices Served.

Informal Notices.	438
Brought forward from 1948.	87
Total requiring abatement.	525
Abated during year.	424
Outstanding.	101

Statutory Notices Served after Reports to Committee.

No. of Statutory Notices served.	137
Brought forward from 1948.	7
Total requiring abatement.	144
Number complied with.	129
Outstanding.	15

Total number of all Notices outstanding at year end.	116.
Number of properties concerned in outstanding Notices.	239

At all times during the year the Department have between 150 and 250 houses connected with outstanding Notices and as each tenant thinks that their complaint is the only complaint it sometimes leads them to say they are not receiving attention. They are dealt with in order and none are forgotten.

The same difficulties were met as in the previous two years. In many properties the cost of repairs far exceeds the proportion of rent to cover them and in many cases exceeds the total rent received for the year. Many visits, telephone calls and letters have to be made to owners and to builders to complete the work required in anything like a reasonable time.

Some seventeen houses were considered unfit to deal with under the Public Health Act and were dealt with under the Housing Act, 1936. These were all reported on to the Committee and the following action taken.

In the case of four, Notices were served under Section 9. Requiring the Person having Control of a House to Execute Works. Of these, two were dealt with by the owners, one by the Local Authority in default and one was outstanding at the end of the year.

Thirteen houses were represented as being unfit for habitation and as no objections were raised by the owner Demolition Orders were made. Unfortunately these have not yet been demolished as alternative accommodation has not yet been found for all the tenants.

Some progress has been made reconditioning houses previously damaged by subsidence. Eight houses having been reconditioned and rehabited. None of the original tenants returned to these from Council properties except one who was an owner occupier, in spite of the fact that they agreed to do

so when they were granted a Council tenancy at the time their own houses were unfit for habitation.

Disinfestation.

18 premises were disinfested for Bugs, 4 for Cockroaches and 1 for Furniture Beetle. Gammexane Smoke Grenades and 5% D.D.T. Spray were used. Free issues of D.D.T. or Gammexane powder have been made and success has been achieved, particularly for cockroaches where powder has been applied regularly and systematically. Cockroaches appear to be more prevalent than bugs The long dry spell encouraged fly-breeding particularly of the offensive Biting Stable Fly, the Stomoxys Calcitrans. The main sources of breeding of this type of fly are the heaps of pig manure adjacent to small pig styes. These are prevalent, the majority being badly constructed and a source of trouble.causing harbourage for fly and rat breeding.

Infectious Disease.

58 visits were made to obtain information re infectious diseases and to disinfect the rooms.

Summary of Infectious Diseases Notified.

Scarlet Fever.	43
Diphtheria.	6
Gastro Enteritis.	1
Cerebro Spinal Meningitis.	1
Erysipelas.	1
Typhoid.	1 Not confirmed).
Tuberculosis.	4
Poliomyelitis.	5 (3 not confirmed).

Terminal disinfection was carried out by spraying with a

liquid disinfectant. At each case a bottle of disinfectant was left and instructions given on the use of same. The bedding was usually taken away and disinfected by steam at the Isolation Hospital. In addition bedding was disinfected after death or after removal of tuberculosis patients. This was disinfected by arrangement with Aketon Hospital. The West Riding County Council agreed during the year to transport such infected bedding to the hospital subject to the Department making the necessary arrangements with the hospital and arranging for the collection and return of the clean bedding. It would appear that some difficulty will be met with in the future in dealing with infectious bedding and it is my intention to put before the Council the question of providing our own disinfecting station preferably to be sited in the Baths Yard as steam is available there. An authority the size of Normanton should have its own facilities.

Offensive Trade Premises.

There is only one Offensive Trade premise that of Tripe Boiler, at the Slaughterhouse. This is well conducted but the premise is unsatisfactory.

If it were possible to obtain a lead from the Government on their policy for slaughterhouses, then some improvements and extensions could be made to this premise to bring it up to standard.

Other Public Health Matters.

Regular visits were made to schools, public conveniences, public houses, clubs and cinemas etc. The whole of the drainage for the new houses was supervised, tested and passed. In all 83 lengths of new drainage were tested and passed. This testing is done by arrangement with the Surveyor, Mr. Copp. The Public Health Department receives the complaints and has to deal with

them once the houses are occupied and by supervising the new work maintain the same standard for work on Council property as on private property. In my previous experience I have seen lack of co-operation between departments resulting in separate departments setting up their own standards often not in agreement. This is a great failing in the eyes of the public who naturally expect one standard for all work supervised by the Local Authority.

The Department had to make arrangements for and carry out the burial of a pauper. This man died on the 3rd April, 1949 after the Public Assistance Board had been taken over by the National Assistance Board. The Local Authority had to bury the body. The funeral and burial were carried out with the necessary reverence, the body being interned in Normanton Churchyard, in a common grave.

Smoke Nuisance.

Complaints were received concerning an offensive factory chimney owned by the National Coal Board. Observations were taken over a period of time and as a result, meetings were arranged with representatives of the National Coal Board. Negotiations were still proceeding at the end of the year.

Food and Drugs Administration.

Special effort has been made to improve the conditions of premises where food is handled and prepared for sale. A survey was commenced of all shops coming within the scope of the Food and Drugs Act but unfortunately was not completed before the year end. The first shops to be inspected were the Fish and Chip shops and Meat Products Factories. A marked all-round improvement has been made. In the case of some of the premises the work required entailed complete rebuilding of the premises. In the majority of cases the owners of businesses showed excellent co-operation. It is surprising to find the number of shops

handling foodstuffs without a constant supply of hot water and even premises without any supply of water at all. In these cases they have drawn water in buckets from neighbouring shops and a bucketful has lasted a day or longer. By the end of the day the condition of the water may be imagined. In most cases the work was carried out on verbal notice and only in 8 cases written Informal Notices were served. One butcher was found to be manufacturing sausage in an old stable and was successfully prosecuted. He was proved guilty and fined on four charges.

Meat and Food Inspection.

The arrangements for slaughtering were the same as for previous years, the whole of the slaughtering being carried out at the Government Controlled Slaughterhouse in King Edward Street. During the months September to January when the number of weekly killings is high, the premises are inadequate. The hanging space is insufficient and inspection has to be made under most unsatisfactory conditions. There are several improvements required, namely

1. Increased hanging space.
2. Better conditions for tripe-dressing and cleaning.
3. The yard area to be paved or concreted.
4. A float operated switch should be installed to the pump which pumps the slaughterhouse liquid refuse to the sewer.

The above improvements are held up as the Ministry do not appear to definitely know whether they intend to carry on or not with the present system.

All the animals killed were inspected before distribution to the shops. This is the one great advantage to centralised slaughtering.

The following is a summary of the number and types of animals killed and inspected:-

Bulls.	Bullocks.	Heifers.	Cows.	Calves.	Sheep.	Pigs.
4	421	199	141	80	2903	182

Carcases Inspected and Condemned.

	Cattle excluding Cows.	Cows.	Calves.	Sheep and Lambs.	Pigs.
Number killed.	624	141	80	2903	182
Number inspected.	624	141	80	2903	182
All diseases except Tuberculosis. Whole carcases condemned.	-	1	1	1	2
Carcases of which some part or organ was condemned.	546			110	30
Percentage of the number inspected affected with disease other than tuberculosis.	17·73%		1·25	3·7	16·5
Tuberculosis only. Whole carcases condemned.	1	4	-	-	-
Carcases of which some part or organ was condemned.	131		-	-	5
Percentage of the number inspected affected with tuberculosis.	17·77%		-	..	2·811

The high percentage of disease found in animals for other causes than tuberculosis is largely accounted for by the incidence of distomatosis or "flukey" or "pipey" livers.

Diseased organs and carcases condemned.

Beef carcases and all organs.	6
Calf carcases and all organs.	1
Pig carcases and all organs.	1
Sheep carcases and all organs.	1
Bovine heads and tongues.	73

Bovine lungs.	135
Bovine hearts.	11
Bovine skirts.	6
Bovine livers.	181
Part bovine livers.	240
Sets of internal organs.	8
Kidneys.	16
Pelvic organs.	5
Frozen beef.	186 lbs.
Pig plucks.	11
Pig stomachs and organs.	22
Pig intestines.	22
Sheep plucks.	81

Total weight of beef condemned.	4249	
Total weight of beef offal condemned.		5063
Total weight of mutton and pork condemned.	224	
Total weight of mutton and pork offal condemned.		518
Total weight of meat condemned.	4473	
Total weight of offal condemned.		5581
Total weight of corned and frozen beef condemned.	210	
Grand Total.	10,264 lbs.	

Private pigs killed in slaughterhouse and inspected. 10

The amount of meat condemned for Tuberculosis.

Meat affected with tuberculosis.	4322
Offal affected with tuberculosis.	1463
Total.	5785 lbs.

The condemned meat is taken away for sterilisation to a depot at Pontefract.

The general quality of meat sent into this area is good, most of the meat being "A" or "B" quality. The amount of meat sent in as "manufacturing grade" or as "reject" is small apart from a quota sent for the manufacturing shops.

Other foodstuffs condemned during the year.

Ham Loaf.	1 tin.
Minced Beef.	12 tins.
Oats.	2 packets.
Kellogg's Flakes.	5 packets.
Shredded Wheat.	14 packets.
Salmon.	4 tins.
Soup.	3 tins.
Fruit Cocktail.	1 tin.
Date Puddings.	3
Beans.	6 tins.
Tea.	½ lb.
Tomatoes.	19 tins.
Milk.	73 tins.
Soya Flour.	29 bags.
Self Raising Flour.	3 bags.
Chutney.	1 jar.
Marmalade.	4 tins.
Peas.	24 tins.
Tomato Soup.	2 tins.
Cordial.	2 bottles.
Dried Eggs.	1 tin.
Coffee.	1 bottle.
Pork.	1 tin.
Junket.	59 packets.
Fruit Flavours.	114 packets.
Chocolate Spread.	396 packets.
Dessert Mould.	32 packets.
Dessert.	96 packets.
Pears.	1 tin.
Bacon.	14½ lbs.
Gooseberries.	1 tin.

Beast Tongue.	5 lbs.
Ham.	10 lbs.
Grapes.	1 tin.
Apricots.	1 tin.
Beetroot.	3 tins.
Orange Juice.	2 bottles.
Tomato Juice.	3 tins.
Apricot Jam.	1 tin.
Melon Jam.	1 tin.
Apple Jam.	1 tin.
Apples.	1 tin.
Beef Broth.	1 tin.
Sardines.	1 tin.
Potatoes.	1 tin.
Apple Juice.	5 cans.
Apple Juice.	12 bottles.
Crayfish.	2 tins.
Mixed Vegetables.	2 tins.
Whalemeat Casserole.	1 tin.
Plums.	5 tins.
Gorgonzola Cheese.	6¼ lbs.
Cherries.	1 jar.
Swiss Roll.	1
Dutch Brawn.	2 tins.
Pickles.	2 jars.
Rabbits.	177.
Chocolate.	7 bars.

219 visits were made to food-preparing premises, namely food shops, meat products factories, ice-cream factories, fish and chip shops, butchers shops etc.

2 premises for the manufacture of meat products, sausages etc., were registered during the year. One previous registration

was cancelled as the firm in question transferred to a new modern factory. The following is a list of the Council's requirements complied with under the Food and Drugs Act, 1938:-

New preparation rooms built.	3
Internal walls and ceilings redecorated.	4
Floors cleansed.	1
Floors repaired.	1
Floors drained to external gullies.	2
Cold water supplies provided.	3
Hot water supplies provided (Gas or Electric Geysers).	10
Lavatory basins provided.	1
Sinks provided.	3
Internal walls rendered.	3
Yards cleansed.	2
Ceilings under-drawn.	1
Refrigerators provided.	15

Milk Supervision.

The year showed great improvement in the milk supply of the area. Two pasteurising plants both on the Felder method of pasteurisation were installed by two local retailers. Both plants were licensed and produced milk of excellent quality and cleanliness. A large percentage of locally produced milk is being treated in the plants. The milk is produced one day and pasteurised and delivered to the consumer on the next day. It is felt that this arrangement is the ideal for which to aim. By the end of the year the whole of the milk supply was being delivered in bottles except for two retailers who had made the necessary arrangements to have their milk bottled but who had not received the necessary permits from the Ministry of Food.

There are 24 retailers in all and they hold the following licences, several holding licences for both Tuberculin Tested (Pasteurised) and Pasteurised milks.

No. of Licences Issued.

Dealer's Licences. (These are issued to retailers who obtain their designated milk from some other licensed source).

Tuberculin Tested Pasteurised.	12
Tuberculin Tested.	1
Pasteurised.	18
Sterilized.	23

Supplementary Licences. (These are licences issued to dealers to retail designated milks in this district where they hold a Principal Licence in another district).

Pasteurised (Supplementary)	3
Accredited Producer's Licences.	2
No. of Raw Milk (Undesignated) Dealers.	2

Of the two latter dealers one has since the end of the year turned over to Pasteurised milk and the other bottles his own milk on the farm. All hand-cans have been dispensed with. It is felt the milk supply position in the area of this authority is excellent and the district is ready to become a "scheduled area" under the new Milk and Dairies (Special Designations) Act, 1949. I would venture to say that the authority is one of a few of its type in this position.

The new Milk and Dairies (Special Designations) Act, 1949, Milk and Dairies Regulations, 1949, The Milk (Special Designation) (Raw Milk) Regulations, 1949 and the Milk (Special Designation) (Pasteurised and Sterilized) Milk Regulations, 1949 came into operation on the first day of October, 1949.

These made sweeping changes in the supervision of milk production and distribution. In my opinion several of these changes were retrograde. The whole of the production side was taken over by the Minister of Agriculture and Fisheries and under the above Acts the Local Authority now have no jurisdiction

over milk producers. The treatment side, the pasteurising plants, were taken over by the Food and Drugs Authority, in our case the West Riding County Council. Now if anything is found to be unsatisfactory by the Local Authority's Inspectors they must now notify the West Riding County Council or the Minister of Agriculture and Fisheries. When one considers that the Department was instrumental in establishing these plants, has seen them grow from paper to actual premises, advised and consulted the owners on all matters and now to have no say in their progress is a bitter pill to swallow. Prior to the new legislation the Department would have had control of the majority of the milk right from producer to final retail sale, now three authorities are concerned in the production and distribution.

NO. OF SAMPLES TAKEN.

No. of Qualitative Samples - 29. All genuine.

No. of Bacteriological Samples.

Type of Milk.	Meth. Blue.		B. Coli.		Phosphatase.		T. B. Exam.	
Results.	Sat.	Unsat.	Sat.	Unsat.	Sat.	Unsat.	Sat.	Unsat.
T. T. Past.	2	-	-	-	2	-	-	-
T. T.	-	-	-	-	-	-	-	-
Pasteurised.	22	1	-	-	21	1	-	-
Accredited.	1	-	-	-	-	-	-	-
Ungraded.	12	4	3	11	-	-	9	1
Goat's Milk.	-	1	-	1	-	-	-	-

Bacteriological Milk Bottle Examinations.

36 passed the test.

3 failed the test.

It will be noted from the above figures the high percentage of unsatisfactory samples in the ungraded milks, against those in designated milks. It is felt that the figures for designated milks are satisfactory. The one unsatisfactory methylene blue

test was the same milk which failed to pass the phosphatase test, showing the milk to be improperly pasteurised. I am satisfied that in that particular case the improper pasteurisation was merely a teething trouble in the new plant. It will also be noted that one of the raw milk samples taken for examination for live tuberculosis bacteria was a positive sample. This was notified to the West Riding County Council who sent along a veterinary surgeon to examine the herd in question. Two cows were suspected to be tubercular and sent in for slaughter. Both were unfit for food due to generalised tuberculosis. That milk had been sold to the public probably for some days in its raw state with the tuberculosis organisms present. Surely cases found like this do strengthen the case that all the milk should be designated milk and preferably pasteurised. If tuberculin tested pasteurised so much the better, as this type gives the public a double safeguard.

Control of Ice-cream.

There are three registered premises for the manufacture of ice-cream. Two fully comply with the "Heat Treatment" Regulations and one does not. The latter manufacturer agreed not to manufacture until the necessary equipment be provided. 19 premises are registered for the sale of ice-cream. The Council agreed to establish the following Code of Practice for ice-cream vehicles and stalls and by the following season it is hoped it will be fully complied with.

Code of Practice.

1. Where ice-cream is sold in a street or other place of public resort from a stall, cart, barrow or other vehicle or from a basket, pail, tray or other container used without a stall or vehicle, every dealer shall have his name and address legibly and conspicuously displayed on the stall, vehicle or other container, as the case may be.

2(a). Barrows and other sales points - All such vehicles etc. shall be fitted with an overall roof cover to protect the retailing unit from both excessive sun and other climatic conditions, under which glass screens shall be fitted. The utensil rinsing bowl shall be placed inside a glass dome or container and a similar glass cover should be supplied for the storage of wafers, biscuits etc. A box or drawer should be fitted to the barrow etc., to hold soap and towels so that hand cleansing can be carried out by the person having charge of the barrow etc.

2(b). Other vehicles - Similar requirements should be observed in relation to mechanically propelled and other vehicles, except that the screens may be dispensed with if the vehicle is glass panelled on the outside. Such glass panels may be so constructed as to allow parts to slide open for the service of ice-cream.

3. Every stall, vehicle etc., shall be kept in a good state of repair and shall be maintained at all times in a state of thorough cleanliness.

4. Suitable accommodation shall be provided on the stall, vehicle etc., for the storage of ice-cream, biscuits, wafers etc., and for the storage of utensils.

5. A sufficient supply of clean hot water, Sodium Hypochlorite solution, soap, clean towels, clean cloths and a nail brush shall be provided in order that cleanliness of the hands and nails of the persons selling ice-cream may be maintained at all times. All apparatus and utensils brought into contact with ice-cream shall be kept clean at all times. The water shall be renewed as often as may be necessary for the efficient cleansing of utensils etc.

6. All persons engaged in the sale of ice-cream shall observe strict cleanliness in regard to their persons and their clothing and shall take all precautions which may be necessary to prevent risk of contamination to the ice-cream on sale. A clean, washable

overall shall be worn by persons carrying out the sale of ice-cream.

7. Premises which are being used for the storage of utensils and for the storage of ice-cream left over after sale from the stalls, vehicles etc., shall be suitable for registration and shall comply with the provisions of the Food and Drugs Act, 1938.

61 visits were made in connection with this work and 44 samples taken. These were returned as follows:-

Grade 1 - 7.		80% of samples should fall in Grades
Grade 2 - 10.		1 or 2 and the results are mainly
Grade 3 - 8.		poor. It is hoped better selling
Grade 4 - 19.		conditions will improve any further
		results.

Samples of rinse waters from equipment were taken and these were:- Satisfactory - 3. Unsatisfactory - 2.

5 qualitative samples were taken for fat content. All were in order but showed variations in fat from 2·68% to 10·74%.

Rodent Control.

The main sources of infestation were again small pig-keepers, hen-pens etc. Carelessness in handling animal feeding stuffs being the main cause. One of the staff is trained in the Ministry Rodent Control methods. 147 visits were made in connection with this work and 16 premises were treated for rats and 3 for mice. One maintenance treatment was carried out on the Council sewers.

Factories and Workplaces.

The Factories and Workplaces Register records 78 premises to which the Act applies. 2 are Building Sites and 22 are Factories

without power where the Council are responsible for cleanliness, overcrowding, temperature, ventilation, lighting, drainage of floors and sanitary conveniences and of provision of means of escape in case of fire. 56 are Factories with power administered by H. M. Inspectors with the Council responsible for the provision of sanitary accommodation and means of escape in case of fire. One new certificate for means of escape in case of fire was issued.

63 inspections were made under this Act. Defects were found showing in one case inadequate ventilation, two cases of insufficient sanitary conveniences, one case of unsuitable conveniences and four other offences. All were remedied by verbal notice and interview with the responsible person without recourse to more drastic action.

Shops.

9 visits were made under the Shops Act mainly in connection with hours of closing. The Council again brought into force an Order made under the Shops (Hours of Closing) Act, 1928, to operate between November 6th 1949 and March 4th 1950.

Petroleum Acts.

12 premises are licensed to store petroleum, an increase of two. In every case the petroleum is stored in underground tanks. The total storage capacity of the tanks is 14,800 gallons. No notices were served under this Act.

Housing Statistics.

Total number of houses.	5480
This shows an increase of 41 houses made up as follows:-	
New Council Houses.	30
New Private Houses.	3

Reconditioned after subsidence damage		8
	Total.	41

One house was vacated for demolition and one rendered unfit for habitation due to subsidence damage.

No. of back to back houses	-	Normanton	203
		Altofts	95
No. of single back type houses.(No through ventilation).			
		Normanton	49
		Altofts	12
		Total	359
No. of Council Houses	-	Traditional Type	717
		Prefabricated Type	200
		Total	917

Housing.

On the 1st February, 1949 the Council appointed a Housing Officer to take over the duties of house letting etc. The whole of the files, applications system etc., were handed over. Close co-operation is maintained with the new Department. I would suggest that the Council consider allowing a small percentage of new houses for re-housing tenants from unfit houses which could then be demolished. There are many old houses ripe for demolition being unfit for habitation and not repairable at anything like reasonable cost.

Staff.

Thanks are hereby expressed for the efficient service rendered by the staff. Two changes occurred during the year, Miss M. Byrne left the Department for the Clerk's Department in February and Mr. A. Sylvester obtained another post with Nottingham County Council in July. Mr. C. R. Cresswell a fully qualified Inspector commenced duties on March 1st as Additional

Sanitary Inspector and Miss A. Webb commenced duties as Typist/Clerk on April 1st. Both have proved themselves excellent staff members and the Department is now up to strength. Towards the end of the year three ex-service men served a period of probation in the office in connection with a Post-War Study Scheme for training Sanitary Inspectors.

I remain,

Your Obedient Servant,

Ernest Reddrough